

United States District Court  
NORTHERN DISTRICT OF CALIFORNIA

LINDA HOLT

**SUMMONS IN A CIVIL CASE**

CASE NUMBER: *07-4656 mg*

**V.**

SALARY CONTINUANCE AND LONG TERM  
DISABILITY PLAN; KAISER FOUNDATION  
HEALTH PLAN; KAISER PERMENENTE SALAR

TO: (Name and address of defendant)

Kaiser Foundation Health Plan  
Kaiser Foundation Health Plan, Inc.  
1 Kaiser Plaza  
Oakland, CA 94612

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Thornton Davidson  
The ERISA Law Group  
2055 San Joaquin Street  
Fresno, CA 93721

an answer to the complaint which is herewith served upon you, within 40 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgement by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

Richard W. Wieking

CLERK

DATE SEP 19 2007

  
(BY) DEPUTY CLERK

GLORIA ACEVEDO

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS) ROBERT J. ROSATI ATTORNEY AT LAW ROBERT J. ROSATI - SBN # 112006 2055 SAN JOAQUIN STREET FRESNO, CA 93721-0000 ATTORNEY FOR (NAME) LINDA HOLT		TELEPHONE NO. (559) 256-9800	FOR COURT USE ONLY	
		REFERENCE NUMBER 0G952845-02		
Insert name of court, judicial district or branch court, if any, and post office and street address UNITED STATES DISTRICT COURT,				
SHORT NAME OF CASE LINDA HOLT vs. SALARY CONTINUANCE, ET AL				
PROOF OF SERVICE	HEARING DATE:	TIME:	DEPT/DIV:	CASE NUMBER: 074656MEJ

I am and was on the dates herein mentioned over the age of eighteen years and not a party to this action;

**I served the:**

SEE ATTACHED LIST OF DOCUMENTS;

**Name:** KAISER FOUNDATION HEALTH PLAN, KAISER FOUNDATION HEALTH PLAN, INC.

**Person Served:** JENELLE FLEWELLEN  
**Title:** PERSON AUTHORIZED TO ACCEPT

**Date of Delivery:** 10/09/07  
**Time of Delivery:** 03:10 pm

**Place of Service:** 1 KAISER PLAZA  
OAKLAND, CA 94612 (Business)

**Manner of Service:** Personal Service - By Personally Delivering Copies.

**In Compliance With:** ☒ Federal Rules of Civil Procedure  
☐ California Code of Civil Procedure

**Fee for service:** \$ 27.75

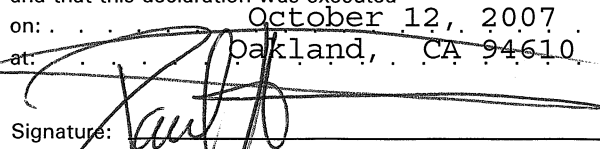
JUDICIAL COUNCIL FORM, RULE #982 (A)(23)

☒ Registered: . . . . . ALAMEDA . . . . . County,  
Number: . . . . .  
**Attorneys Diversified Services**  
2421 Mendocino Avenue, #200A  
SANTA ROSA, CA 95403  
(707) 545-5455

Client File # HOLT VS. SALARY CONTINUANCE

PROOF OF SERVICE

I declare under penalty of perjury that the foregoing is true and correct  
and that this declaration was executed  
on: . . . . . October 12, 2007 . . . . .  
at: . . . . . Oakland, CA 94610 . . . . ., California.

Signature:   
PAUL HOLLINS  
Title: REGISTERED PROCESS SERVER

